

Psychiatric Residential Treatment Facilities

South Carolina Department of Health and Human Services
Division of Behavioral Health
2021

Disclaimer

- Materials presented today are not comprehensive. This training does not take the place of reading the provider policy and procedure manual. Prior to treatment, all beneficiaries must meet the medical necessity criteria for that service. All information in this presentation pertains to South Carolina Department of Health and Human Services Healthy Connections (SCDHHS) Medicaid beneficiaries.

Purpose of the Orientation

- To act as a guide for Psychiatric Residential Treatment Facilities (PRTF) providers who are learning about South Carolina Medicaid policy and procedures prior to rendering PRTF services.
 - While this presentation is designed to enhance understanding of the Medicaid Standards regarding the Psychiatric Hospital Services Manual, all aspects and policy are not covered in this presentation. Please review the Psychiatric Hospital Services Manual and the Administrative and Billing Manual.
- To help providers avoid potential Medicaid recoupment.

Objectives

At the completion of this presentation, providers will be able to:

1. Gain a better understanding of the structure, characteristics, policies and procedures regarding PRTFs.
2. Identify regulatory requirements for PRTFs.

Requirements of PRTFs

- Maintain a provider agreement with a State Medicaid Agency to provide the inpatient services benefit to Medicaid-eligible individuals under the age of 21 (psych under 21 benefit);
- Provide PRTF services under the direction of a physician;
- Must be accredited by The Joint Commission, Commission on Accreditation of Rehabilitation Facilities (CARF), or Council On Accreditation (COA); and
- Meet requirements in a 42 CFR 441.151 to 441.182, and 483.350 to 483.376.

PRTF Provider Qualifications

- PRTF providers must comply with provisions of 42 CFR Section 483.50 to 483.376.
- Each PRTF that provides inpatient psychiatric services for children under age 21 must attest in writing to SCDHHS that the facility follows the conditions of participation on an annual basis.

PRTF Facility Changes

- PRTF service providers requesting any modification to their facility are required to notify SCDHHS or its designee in writing 60 days in advance of the modification and must receive written approval for modifications from SCDHHS or its designee prior to claiming Medicaid reimbursement. Changes include:
 - Changes and revisions to policies and procedures enacted since the provider was enrolled or since the last comprehensive review was completed.
 - An existing provider intends to add the same service but to serve a different population; e.g., age, gender, etc.
 - An existing facility is sold, or ownership is transferred to a different entity.
 - An existing provider changes its facility director or other operational changes.
 - An existing provider intends to increase its bed capacity, or to reorganize services through diversification of programming (e.g., respite, crisis stabilization) and/or deployment of staff to reflect the facilities role as a community resource and not a “placement”.
 - An existing provider changes address/physical location.

Admission/Continued Stay Criteria

- Medicaid beneficiaries admitted to a PRTF are beneficiaries under the age of 21. If the beneficiary receive services immediately before he or she reaches age 21, services may continue until the earlier of the date the individual no longer requires the services or the date the individual reaches age 22.
- For SC Medicaid beneficiaries who are a fee-for-service recipient, PRTFs **must** obtain prior authorization from the designated Quality Improvement Organization (QIO) for admission and continued stay at a PRTF.
- For SC Medicaid beneficiaries who are a managed care recipient, PRTFs **must** obtain prior authorization from the respective Managed Care Organization for admission and continued stay at a PRTF.
- It is important to note that failure to obtain a prior authorization or continued stay, may result in a denied claim.

PRTF Services

- A beneficiary must receive the following services while in a PRTF:
 - Individualized Plan of Care
 - Discharge Planning
 - Psychiatric Evaluations
 - Assessments/ Reassessments
 - Psychological Evaluation
 - Individual Psychotherapy
 - Group Psychotherapy
 - Family Psychotherapy
 - Medical Services
 - Medication Management
 - Therapeutic Home Time (when applicable)

